

# Quarterly Totals

## Demographic Reporting Form

Positive Alternatives

Date: March 1st, 2016 Grantee Name: Options For Women | Morris

### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
			2	3	5		1

### 2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
5	2	1		

1 male client, 1 negative test, 1 Referral to outside resources

### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
5	3	3

### 4. Client Race:

Race: White	Race: African-American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
5					5	1

### 5. Client Ethnicity:

Hispanic Ethnicity : Yes	Hispanic Ethnicity : No	Ethnicity: Unknown
5	5	1

INSTRUCTIONS FOR COMPLETING DEMOGRAPHIC REPORTING FORM

1. Enter the date covered by the reporting period. The date will correspond to the quarterly report (e.g., report due April 20<sup>th</sup> covers the period January 1 – March 31<sup>st</sup>; report due July 31<sup>st</sup> covers the period April 1 – June 30<sup>th</sup>, etc.).
2. Enter your organization name.
3. Numbers 1 – 5 ask for the demographic information that was previously collected on the Necessary Services Data Intake form. Enter the totals for each of the demographic categories in numbers 1 – 5 that were collected during the stated reporting period.
4. Save the form as a new document. Send it in by email with your Update Report of the same quarter.
5. Reuse the form each quarter.